



## NOTICE OF INTENT (NOI)

For Coverage Under AZPDES Permit No. AZG2003-001 for  
*Construction Activity Discharges to Waters of the United States*

**FOR COVERAGE, A COMPLETE AND ACCURATE NOI MUST BE SUBMITTED TO:**

**Stormwater Program- Water Permits Section/ NOI**  
Arizona Department of Environmental Quality  
1110 West Washington, 5415B-3, Phoenix Arizona 85007

Is this NOI a revision to one previously filed under the 2003 AZPDES Construction General Permit?

\_\_\_ YES \_\_\_ NO If yes, provide your current authorization No. \_\_\_\_\_

Is the Site Located on  
Indian Country Lands?

\_\_\_ YES \_\_\_ NO

### I. OWNER/OPERATOR (Applicant) INFORMATION

Operator Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Operator's Business Name \_\_\_\_\_

Operator's Address: \_\_\_\_\_

City: \_\_\_\_\_ State: |\_\_| |\_\_| Zip Code: \_\_\_\_\_

**OPERATOR STATUS:** Federal \_\_\_ State \_\_\_ Other Public \_\_\_ Private \_\_\_ Tribal \_\_\_

### II. CONSTRUCTION SITE INFORMATION

Project/Site Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Type of Project (subdivision, school, commercial, etc.) \_\_\_\_\_

If a subdivision, has state or local subdivision approval been obtained? \_\_\_ YES \_\_\_ NO

If yes, provide the subdivision approval number: \_\_\_\_\_

Is the project part of a greater plan of development? \_\_\_ YES \_\_\_ NO

Does the project have/need other environmental permits or approvals? If so, list and provide the permit/approval number (attached sheet, if necessary):

\_\_\_\_\_  
\_\_\_\_\_

Site physical location (include address, if applicable and directions from nearest municipality):

\_\_\_\_\_  
\_\_\_\_\_

City: \_\_\_\_\_ County: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Provide the latitude/longitude of the construction site at the point nearest the receiving water:

Latitude: |\_\_| |\_\_| |\_\_| |\_\_| |\_\_| |\_\_|  
(Degrees, minutes, seconds)

Longitude: |\_\_| |\_\_| |\_\_| |\_\_| |\_\_| |\_\_|  
(Degrees, minutes, seconds)

**NOI for Coverage under AZPDES Permit No. AZG2003-001**

Estimated Project Start Date \_\_\_\_\_ Estimated Completion Date \_\_\_\_\_

Estimate of total acres (to the nearest 1/2 acre) to be disturbed with the entire construction project \_\_\_\_\_

Estimate of total acres (to the nearest 1/2 acre) to be disturbed by your operations \_\_\_\_\_

List all non-stormwater discharges expected to be associated with construction-related activities:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**III. DISCHARGE LOCATION**

Identify the closest receiving waters to construction site: (including dry washes, named waterbodies, and unnamed tributaries): \_\_\_\_\_

Is there a potential for any discharges from the site to enter a municipal storm sewer system (MS4), canal, or a privately-owned conveyance? \_\_\_\_ YES \_\_\_\_ NO

If yes, enter name of MS4 or conveyance owner: \_\_\_\_\_

If this is a linear construction project (i.e., utility lines, pipelines, etc.) is any portion of the planned project within 1/4 mile of any impaired or unique water?  
\_\_\_\_ YES \_\_\_\_ NO \_\_\_\_ N/A (not linear construction)

**IV. Permit authorization can not occur until a Stormwater Pollution Prevention Plan (SWPPP) has been developed and implemented according to the terms of the Construction General Permit, AZG2003-001:**

\_\_\_\_ I confirm that a SWPPP meeting the requirements of this general permit has been developed and will be implemented prior to commencing construction activities at this site.

The SWPPP may be viewed at the following location: \_\_\_\_\_

To view the SWPPP, contact: (name and phone of contact person) \_\_\_\_\_

\_\_\_\_ This project may discharge within 1/4 mile of an impaired or unique waterbody, so a copy of my SWPPP is enclosed with this NOI as required. The SWPPP will be implemented prior to commencing construction activities at this site.

**V. CERTIFICATION BY AUTHORIZED SIGNATORY (PER PART VII.K.1 OF THE PERMIT)**

*"I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage this system, or those persons direction responsible for gathering the information, I believe the information submitted is true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment. In addition I certify that the operator will comply with all terms and conditions stipulated in General Permit No. AZG2003-001 issued by the Director."*

Printed Name: \_\_\_\_\_ Title: \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Business Name: \_\_\_\_\_

Address: \_\_\_\_\_

Phone: \_\_\_\_\_